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506.38266VC2

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ANTONELLI, TERRY STOUT & KRAUS, LLP
1300 NORTH SEVENTEENTH STREET
SUITE 1800
ARLINGTON, VA 22209-3873

020 (Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/692,930	10/27/2003	Junichi Shimada	506.38266VC2	2132

TITLE OF INVENTION: THERAPEUTIC AGENT FOR NEURODEGENERATIVE DISORDERS

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE (S) DUE	DATE DUE
Nonprovisional	NO	\$1400	\$300	\$1700	07/18/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
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SPICACK, PHYLLIS G

1614

514-263300

1. Change of correspondence address or indication of "Fee Address: (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB7122 attached.

agents OR, alternatively,

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys 1 ANTONELLI, TERRY, STOUT AND KRAUS, LLP.

Or agents OR, alternatively,

(2) the name of single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed no name will be printed.

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

KYOWA HAKKO KOGYO CO., LTD.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

TOKYO, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

William I. Solomon

Date: JULY 12, 2006 MBEYENE2 00000119 10692930

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